DIRECTORY OF LICENSED WISCONSIN NURSING HOMES - BY COUNTY

DEPARTMENT OF HEALTH AND FAMILY SERVICES

Division of Disability and Elder Services

Thursday, August 17, 2006

KEY TO DESCRIPTIONS:

Title 18 = Title XVIII, Medicare Certification Title 19 = Title XIX, Medicaid Certification

IMD = Institute for Mental Diseases SNF = Skilled Nursing Facility

NF = Nursing Facility

STATE OF WISCONSIN Bureau of Quality Assurance

PO Box 2969

Madison, WI 53701-2969

County: Washington

| County. Washington | | | License Number, | Owner, Ownership, Certification |
|--|-------------------------------|--------------|-----------------|--|
| PROVIDER/ADDRESS | Contact and Phones | DHFS REGION | Level and Beds | Types, Provider Number |
| VIRGINIA HIGHLANDS HEALTH AND REHABILITATION C | CENTER (262) 509-3300 | | Lic. 5003 | SSC GERMANTOWN OPERATING COMPANY LLC |
| W173 N10915 BERNIES WAY | FAX: (262) 509-3333 | SOUTHEASTERN | SKILLED CARE | LIMITED LIABILITY COMP(FOR-PROFIT) |
| GERMANTOWN, WI 53022 | Administrator: SCOTT MYERS | | 121 Beds | 525653 Title 18 SNF Title 19 NF |
| HARTFORD HEALTHCARE CENTER | (262) 673-2220 | | Lic. 3232 | THI OF WISCONSIN AT HARTFORD LLC |
| 1202 E SUMNER ST | FAX: (262) 673-6730 | SOUTHEASTERN | SKILLED CARE | LIMITED LIABILITY COMP(FOR-PROFIT) |
| HARTFORD, WI 53027 | Administrator: MAUREEN SARDEL | LI | 106 Beds | 525461 Title 18 SNF Title 19 NF |
| CEDAR LAKE HEALTH AND REHABILITATION CENTER | (262) 306-2100 | | Lic. 705 | BENEVOLENT CORPORATION CEDAR COMMUNITY |
| 5595 COUNTY RD Z | FAX: (262) 306-2101 | SOUTHEASTERN | SKILLED CARE | VOLUNTARY NONPROFIT CORP |
| WEST BEND, WI 53095 | Administrator: JOANNE BODIEN | | 229 Beds | 525465 Title 18 SNF Title 19 NF |
| SAMARITAN HEALTH CENTER | (262) 335-4500 | | Lic. 2385 | WASHINGTON COUNTY |
| 531 E WASHINGTON ST | FAX : (262) 335-4699 | SOUTHEASTERN | SKILLED CARE | GOVERNMENTAL COUNTY |
| WEST BEND, WI 53095 | Administrator: EDWARD SOMERS | | 205 Beds | 525165 Title 18 SNF Title 19 NF |
| SAMARITAN'S CEDAR CROSSING SUBACUTE UNIT | (262) 334-8486 | | Lic. 3192 | WASHINGTON COUNTY |
| 3200 W PLEASANT VALLEY RD | FAX: (262) 335-8194 | SOUTHEASTERN | SKILLED CARE | GOVERNMENTAL COUNTY |
| WEST BEND, WI 53095 | Administrator: AMY JEAN MEYER | | 18 Beds | 525618 Title 18 SNF |